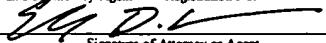




Certification of Facsimile Transmission

I hereby certify that this correspondence is being transmitted to the Commissioner for Patents in the US Patent and Trademark Office via First Class Mail with the U.S. Postal Service on June 02, 2005

Erich Hemm 47,286
Name of Attorney/Agent Registration No.

Signature of Attorney or Agent

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No. : 10/004,904
Applicant(s) : Robert Charles Rosselot
Filed : December 3, 2001
Title : Systems and Method for Control of Conference Facilities and Equipment
TC/A.U. : 2174
Examiner : Sy D. Luu
Conf. No. : 8508
Docket No. : 8798L
Customer No. : 27752

PETITION FOR EXTENSION OF TIME PURSUANT TO 37 C.F.R. § 1.136(a)

Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above-identified application.

The requested extension and fee are as follows:

One month (37 CFR 1.17(a)(1)) \$
 Two months (37 CFR 1.17(a)(2)) \$
 Three months (37 CFR 1.17(a)(3)) \$1,020.00

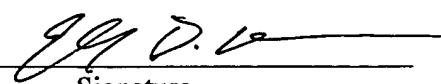
The Director is hereby authorized to charge any additional fees which may be required, or credit any overpayment, to Deposit Account Number 16-2480.

Respectfully submitted,

06/10/2005 DEMMANU1 00000046 162480 10004904

01 FC:1253 1020.00 DA

THE PROCTER & GAMBLE COMPANY

By 

Signature

Erich D. Hemm

Typed or Printed Name

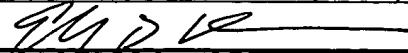
Registration No. 47,286

(513) 634-8960

Date: June 2, 2005
Customer No. 27752

FEE TRANSMITTAL for FY 2005		Complete if Known	
<p style="text-align: center;">Patent fees are subject to annual revision. Effective December 8, 2004</p> <p style="text-align: right;">JUN 09 2005 PATENT & TRADEMARK OFFICE U.S. DEPARTMENT OF COMMERCE</p>		Application Number	10/004,904
		Confirmation Number	8508
		Filing Date	December 3, 2001
		First Named Inventor	Robert Charles Rosselot
		Examiner Name	Sy D. Luu
		Art Unit	2174
TOTAL AMOUNT OF PAYMENT (\$) 1,020.00		Attorney Docket No.	8798L

METHOD OF PAYMENT			FEE CALCULATION (continued)																																									
<p>1. [X] The Director is hereby authorized to charge indicated fees submitted on this form, credit any over payments, and charge any additional fee(s) during the pendency of this application to:</p> <p>Deposit Account Number: 16-2480 Deposit Account Name: The Procter & Gamble Company</p>			<p>5. <u>ADDITIONAL FEES</u></p> <table> <tr> <td><u>Fee Description</u></td> <td style="text-align: right;"><u>Fee Paid</u></td> </tr> <tr> <td>Extension for reply within 1st month</td> <td style="text-align: right;">(\$120) <input type="checkbox"/></td> </tr> <tr> <td>Extension for reply within 2nd month</td> <td style="text-align: right;">(\$450) <input type="checkbox"/></td> </tr> <tr> <td>Extension for reply within 3rd month</td> <td style="text-align: right;">(\$1,020) <input checked="" type="checkbox"/></td> </tr> <tr> <td>Extension for reply within 4th month</td> <td style="text-align: right;">(\$1,590) <input type="checkbox"/></td> </tr> <tr> <td>Extension for reply within 5th month</td> <td style="text-align: right;">(\$2,160) <input type="checkbox"/></td> </tr> <tr> <td>Information Disclosure Statement fee</td> <td style="text-align: right;">(\$180) <input type="checkbox"/></td> </tr> <tr> <td>37 CFR 1.16(e) Late Oath/Declaration (nonprovisional)</td> <td style="text-align: right;">(\$130) <input type="checkbox"/></td> </tr> <tr> <td>37 CFR 1.17 (q) Missing Parts (provisional)</td> <td style="text-align: right;">(\$50) <input type="checkbox"/></td> </tr> <tr> <td>Non-English specification</td> <td style="text-align: right;">(\$130) <input type="checkbox"/></td> </tr> <tr> <td>Notice of Appeal</td> <td style="text-align: right;">(\$500) <input type="checkbox"/></td> </tr> <tr> <td>Filing a brief in support of an appeal</td> <td style="text-align: right;">(\$500) <input type="checkbox"/></td> </tr> <tr> <td>Request for oral hearing</td> <td style="text-align: right;">(\$1,000) <input type="checkbox"/></td> </tr> <tr> <td>Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c)</td> <td style="text-align: right;">(\$1,370) <input type="checkbox"/></td> </tr> <tr> <td>Other: _____</td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> </table>		<u>Fee Description</u>	<u>Fee Paid</u>	Extension for reply within 1 st month	(\$120) <input type="checkbox"/>	Extension for reply within 2 nd month	(\$450) <input type="checkbox"/>	Extension for reply within 3 rd month	(\$1,020) <input checked="" type="checkbox"/>	Extension for reply within 4 th month	(\$1,590) <input type="checkbox"/>	Extension for reply within 5 th month	(\$2,160) <input type="checkbox"/>	Information Disclosure Statement fee	(\$180) <input type="checkbox"/>	37 CFR 1.16(e) Late Oath/Declaration (nonprovisional)	(\$130) <input type="checkbox"/>	37 CFR 1.17 (q) Missing Parts (provisional)	(\$50) <input type="checkbox"/>	Non-English specification	(\$130) <input type="checkbox"/>	Notice of Appeal	(\$500) <input type="checkbox"/>	Filing a brief in support of an appeal	(\$500) <input type="checkbox"/>	Request for oral hearing	(\$1,000) <input type="checkbox"/>	Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c)	(\$1,370) <input type="checkbox"/>	Other: _____	<input type="checkbox"/>										
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<p>3. <u>APPLICATION SIZE FEE:</u> Sheets of Spec and Drawings <input type="checkbox"/> (\$250 for each 50 sheets in excess of 100, except for sequence and program listings)</p>			SUBTOTAL (2)+(3) (\$) <input type="checkbox"/>																																									
<p>4. <u>EXTRA CLAIM FEES FOR UTILITY AND REISSUE:</u></p> <table> <thead> <tr> <th></th> <th style="text-align: center;"><u>Extra</u></th> <th style="text-align: center;"><u>Fee from</u></th> <th style="text-align: center;"><u>Fee</u></th> <th></th> </tr> <tr> <th></th> <th style="text-align: center;"><u>Claims</u></th> <th style="text-align: center;"><u>Below</u></th> <th style="text-align: center;"><u>Paid</u></th> <th></th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td style="text-align: right;">[] - 20** = [] x</td> <td style="text-align: right;">[] =</td> <td style="text-align: right;">[]</td> <td></td> </tr> <tr> <td>Independent Claims</td> <td style="text-align: right;">[] - 3** = [] x</td> <td style="text-align: right;">[] =</td> <td style="text-align: right;">[]</td> <td></td> </tr> <tr> <td>Multiple Dependent claims:</td> <td style="text-align: right;">[] =</td> <td style="text-align: right;">[] =</td> <td style="text-align: right;">[]</td> <td></td> </tr> </tbody> </table> <p>** or number previously paid, if greater; For Reissues, see below</p> <p><u>Fee Description</u></p> <p>Claims in excess of 20 (\$50 per claim) Independent claims in excess of 3 (\$200 per claim) Multiple dependent claim, if not paid (\$360) **Reissue: each independent claim over 3 and more than in the original patent (\$200 per claim) **Reissue claims: each claim over 20 and more than original patent (\$50 per claim)</p>				<u>Extra</u>	<u>Fee from</u>	<u>Fee</u>			<u>Claims</u>	<u>Below</u>	<u>Paid</u>		Total Claims	[] - 20** = [] x	[] =	[]		Independent Claims	[] - 3** = [] x	[] =	[]		Multiple Dependent claims:	[] =	[] =	[]		SUBTOTAL (4) (\$) <input type="checkbox"/>																
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SUBMITTED BY			Complete (if applicable)	
Name (Print/Type)	Erich D. Hemm		Registration No. (Attorney/Agent)	47,286
Signature			Telephone	(513) 634-8960
			Date	June 2, 2005

+ This collection of information is required by 37 CFR 1.17. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon individual case. Any comments on the amount of time you are required to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P. O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.